

HIV - AIDS and Hepatitis Policy

Section 1 - Purpose

Statutory Requirements

(1) This Policy is framed within the contexts of four Acts:

- a. Anti-Discrimination Act 1977 (NSW);
- b. Work Health and Safety Act 2011;
- c. Disability Discrimination Act 1992 (C'th); and
- d. Public Health Act 2010 (NSW).

Section 2 - Glossary

(2) Nil.

Section 3 - Policy

(3) In promoting the health and well-being of the members of the community, it is the policy of the the University to take appropriate steps to minimise the risk of transmission of infectious diseases such as the human immunodeficiency virus (HIV) and hepatitis. The the University is also committed to supporting and protecting staff and students living with HIV/AIDS and hepatitis from harassment or discrimination.

(4) Specifically, the the University is committed to:

- a. providing a safe and healthy work/study environment that minimises the risk of infection posed by HIV, hepatitis or similar viruses;
- b. disseminating up-to-date information on the characteristics, modes of transmission and prevention of contraction of these viruses;
- c. promoting informed awareness, understanding and tolerance of issues and concerns in relation to HIV or hepatitis viruses;
- d. ensuring confidentiality and privacy for any person who discloses HIV or hepatitis infection in the course of providing or using the services of the the University;
- e. protecting the rights of staff, students and visitors who are infected with HIV, hepatitis or similar viruses; and
- f. ensuring that there is no discrimination, harassment or victimisation of people so infected.

(5) The following principles and guidelines, though focused on HIV/AIDS, are generally applicable to other blood borne infectious diseases such as hepatitis B and hepatitis C.

Part A - Responsibilities of Staff and Students

(6) All staff and students are expected to follow instructions of safe practice in work/study activities and to act in a

manner that does not place others at risk of contracting infectious diseases. Staff and students have a responsibility to familiarise themselves with the specific safety procedures pertaining to their school or section. In particular, staff and students who know they have an infectious disease, such as HIV or hepatitis, are expected to exercise their duty of care towards other people with whom they come into contact in the course of their studies, work or social life, to minimise the risk of transmitting infection. Any breach of this duty of care may constitute negligence and lead to an action for damages to compensate for the harm suffered.

Part B - Prevention of Transmission

(7) The the University seeks to ensure that the risk of transmission of, or infection with, HIV, hepatitis and other blood borne diseases is minimised.

Infection control procedures

(8) Staff and students whose work or study brings them into contact with blood, body fluids or other infectious material should routinely use universal precautions and infection control procedures (see Blood and Bodily Fluids Handling Guidelines). Comprehensive procedures and guidelines to be followed by staff and students in the laboratory setting and areas deemed high risk will be developed by the Biosafety Committee.

(9) It is the responsibility of Faculties and Divisions to ensure that:

- a. safe procedures relevant to their work and study areas are established, documented and disseminated to staff and students;
- b. appropriate clothing and equipment is provided as required; and
- c. all accidents/incidents which may place staff, students or others at risk of infection are noted and actioned in accordance with established procedures.

Training and education

(10) The contents of this Policy will be widely disseminated to staff and students.

(11) Education programs will be included in appropriate staff development courses and student orientations to provide information both on the transmission of infectious diseases such as HIV and Hepatitis and employees' and students' legal rights and responsibilities in the work and study place.

(12) It will be the responsibility of Faculties and Divisions with the assistance of the Biosafety Committee to ensure appropriate education and instruction of staff and students who come into contact with human blood, body fluids or tissues as part of their duties or study program, to minimise occupational health and safety risks associated with HIV, hepatitis and other blood borne infections.

(13) Faculties will also ensure that the course content of relevant undergraduate and postgraduate programs adequately prepares students for professions where issues related to HIV and hepatitis infection may arise.

Immunisation

(14) There is no vaccine for HIV. Immunisation is available to protect against the transmission of Hepatitis A and B. Vaccination programs will be made accessible to staff and students whose work/study puts them at a higher risk of exposure to the hepatitis virus (as determined by the Biosafety Committee's categorisation).

Facilities to minimise social transmission

(15) The the University will provide appropriate facilities to minimise the transmission of HIV and hepatitis viruses through social activities on campus, such as accessible condom vending machines and needle exchange programs.

The availability of such facilities as a means of limiting the transmission of HIV and hepatitis viruses should be publicised to students on each campus.

Part C - Rights of People Who Have HIV, Hepatitis or Similar Viruses

(16) In accordance with its Equal Opportunity Policy, Charles Sturt University is committed to providing a learning and employment environment that is free of discrimination and harassment and supportive of productivity, academic achievement and the dignity and self-esteem of every student and employee.

(17) The the University has an obligation and a commitment to take all reasonable steps to accommodate staff and students who are living with HIV/AIDS, hepatitis or similar viruses. Discrimination, harassment or unfair treatment on the basis of infection or perceived infection will not be tolerated by the the University.

Part D - Grievance Procedure

(18) The the University has a grievance procedure for resolving complaints of unfair treatment, discrimination or harassment. The confidentiality of grievances is covered in the section "Confidentiality and Privacy".

(19) The Grievance Procedure is coordinated by the Equal Opportunity Unit and Grievance Advisers are available on each campus. Members of the the University community wanting information or advice with regard to a complaint of discrimination or harassment, should contact a Grievance Adviser or staff of the Equal Opportunity Unit.

(20) Students may also wish to contact specific student organisations for information, support or referral, such as the Students' Council, Gay and Lesbian student groups, International Students Association or Aboriginal Students Association, or any other person or organisation.

Part E - Confidentiality and Privacy

(21) The the University has a statutory responsibility to ensure the confidentiality of information about staff or students with HIV/AIDS or hepatitis.

(22) All steps should be taken to ensure privacy and confidentiality in all situations related to HIV/AIDS or other infectious diseases. Improper breaches of confidence and the release of confidential information are illegal, can constitute discrimination and result in the lodgement of a complaint with the NSW Anti-Discrimination Board or Human Rights Commission .

- a. Students and employees are not legally obliged to inform the the University of their HIV status.
- b. Personnel and medical records are to be treated with strict confidentiality and kept in a secure place.
- c. Information on employees obtained in the process of applying for superannuation and insurance is private and confidential.
- d. Consent to disclose information must be obtained from the person to whom the information relates before it can be disclosed to other persons.

(23) Disclosure of a person's HIV status may be defamatory.

Part F - the University Services

(24) The the University Health Service and the Counselling Service will provide confidential information and referrals for both staff and students who have concerns regarding communicable diseases. Counselling support is available for staff through the the University's Employee Assistance program (EAP) run by IPS and for students through Student Services Office. (25) The the University Health Service can provide HIV antibody screening, hepatitis B screening and vaccinations, and counselling. Confidential referrals can be arranged for other services such as blood tests, needle and syringe exchange, and support groups.

(26) Staff of the the University's Equal Opportunity Unit can provide confidential information on staff and students' rights and responsibilities with regard to infectious diseases such as HIV/AIDS, hepatitis etc. The Unit can also provide assistance with EEO and discrimination issues.

(27) The Occupational Health & Safety Unit can assist Faculties and Divisions to develop policies and procedures that will enable them to meet the University's health and safety obligations with regard to HIV and hepatitis. The Unit can also facilitate training if requested.

(28) It is the responsibility of these sections to keep up to date with services available within the community and refer staff or students where appropriate.

Part G - Responsibility for Implementing this Policy

(29) It is the responsibility of the Vice-Chancellor under the provisions of the relevant legislation (see Statutory Requirements, clause 1) to ensure that this Policy is upheld and the objectives within it are met. The mechanisms and delegations already established within the the University under the terms of these acts will be used for the implementation of the Policy.

(30) In the case of the anti-discrimination provisions of the Policy, those to whom the Vice-Chancellor has delegated responsibility under the provisions of the Equal Opportunity Policy will be responsible.

(31) In the case of the occupational health and safety provisions, the Work Health and Safety Policy nominates the Executive Director, Human Resources as primarily responsible for implementation.

Part H - General Information

What is HIV/AIDS?

(32) The Human Immunodeficiency Virus (HIV) gradually impairs the immune system, making the body vulnerable to the development of various other infections and cancers. A person can be free of symptoms and unaware of their HIV status for many years. HIV infection develops into Acquired Immune Deficiency Syndrome (AIDS) when the person's immune system diminishes to the point that they develop various AIDS related infections and illnesses. The average time period from HIV infection to the development of AIDS is 8 to 10 years.

What is Hepatitis?

(33) Hepatitis is an inflammation of the liver caused by a number of different viruses (hepatitis A, B, C etc.) which attack the liver. Hepatitis A is generally non-fatal and has no long term effects. However, hepatitis B and other strains of the hepatitis virus are severely debilitating, and can cause chronic infection leading to potentially fatal liver disease in later life. Symptoms of viral hepatitis include fatigue, mild fever, muscle or joint aches, vomiting, loss of appetite and abdominal pain. A person with hepatitis is generally infectious during the time he/she feels unwell but may also be infectious for some time after this. A person with blood borne hepatitis may not have fallen ill but may be infectious to others for some time.

Part I - How are the Viruses Transmitted?

HIV Transmission

(34) Studies throughout the world have demonstrated that HIV is transmitted in only three ways:

- a. through unprotected sexual intercourse this includes exchange of all body fluids which may occur during penis/vaginal/anal insertive and receptive sexual intercourse. Oral/genital sex may also be a potential risk. Oral/anal sexual practices are considered high risk behaviours;
- b. through blood or blood products being introduced into the body, primarily through sharing needles and using syringes to inject substances, but also via open wounds; and
- c. in some circumstances from HIV positive mother to baby (before birth, during birth or afterwards by breast feeding).

Hepatitis transmission

(35) Hepatitis A is normally transmitted by oral ingestion of food or water contaminated with faeces from an infected person. Transmission is prevented by hand washing, particularly by food handlers, and ensuring that drinking water is uncontaminated. A hepatitis A vaccine is available.

(36) Hepatitis B is transmitted by blood and some body fluids. Blood, saliva and sexual secretions of hepatitis B carriers and people with acute hepatitis B are potentially infectious. A hepatitis B vaccine is available.

(37) Hepatitis C and other more recently identified strains of the virus (also potentially fatal) are transmitted by blood. However, knowledge about their spread in the community is still incomplete. A vaccine is not yet available.

(38) Blood borne hepatitis can be contracted in the same way as HIV but the risk of infection with hepatitis is much greater.

Social Contact

(39) HIV and specifically hepatitis type B and C infection do not occur through ordinary social contact. There is no evidence to suggest HIV infection being contracted through the sharing of cutlery or crockery, hand shaking, kissing, coughing or sneezing, mosquitoes, toilets, swimming pools, drinking fountains, sharing equipment such as telephones or any form of casual contact or domestic living arrangements with people who are infected with HIV. It may be possible for the hepatitis virus to be contracted through sharing of razors or toothbrushes or objects which penetrate the skin.

HIV And The Workplace

(40) Outside of laboratory and health care settings, there is no evidence of HIV transmission through casual person to person contact. Those working or studying in laboratory and health care settings who follow universal infection control procedures (see Blood and Bodily Fluids Handling Guidelines) are extremely unlikely to contract HIV or hepatitis.

Part J - Relevant Legislation

(41) The NSW Anti-Discrimination Act 1977 makes it generally unlawful to discriminate against people with HIV/AIDS by virtue of their:

- a. disability (the definition of which includes any organism in the body that could cause a disease or illness, and encompasses past, present, imputed and future disability;
- b. homosexuality (actual or presumed); or
- c. race, nationality or ethnic background, or transgender.

(42) It is unlawful to discriminate on any of these grounds in employment or when providing accommodation, education or goods and services.

(43) Types of HIV/AIDS related discrimination include:

- a. discrimination against people who are HIV positive or have an HIV related illness, or who have AIDS;
- b. discrimination against homosexuals or people assumed to be homosexual because it is assumed they have AIDS;
- c. discrimination against people with haemophilia;
- d. discrimination against intravenous drug users;
- e. discrimination against people from certain ethnic groups because it is assumed they are more likely to have AIDS.

(44) It is also unlawful to discriminate against a person on the ground of their being a parent, partner, carer or associate of an HIV positive person or a person with hepatitis.

(45) The Work Health and Safety Act 2011, requires all persons conducting a business or undertaking (PCBU's) to ensure health and safety of its workers, so far as is reasonably practicable, by eliminating risks to health and safety. If this is not reasonably practicable, risks must be minimised so far as is reasonably practicable. PCBUs owe a similar duty of care to other people who may be at risk from work carried out by the business or undertaking. The Act also confers a responsibility on employees to act with regard for the health and safety of any person in the workplace, and to comply with workplace requirements imposed by health and safety legislation.

(46) The Disability Discrimination Act 1992 (C'th) makes it generally unlawful to discriminate against a person because:

- a. they have an illness or disease-causing organism present in their body; or
- b. they have organisms capable of causing disease or illness present in their body.

(47) The Public Health Act 2010 imposes an obligation of confidentiality on a medical practitioner or other person who, in the course of providing a service, obtains information about another person's HIV status or decision to be tested for HIV. The obligation extends to taking all reasonable steps to ensure such information is not disclosed to another person.

Section 4 - Procedures

(48) Nil.

Section 5 - Guidelines

(49) Refer to the Blood and Bodily Fluids Handling Guidelines .

Status and Details

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